



|   |  |  |
|---|--|--|
| <b>Index of Claims</b><br> | <b>Application/Control No.</b><br>10656750 | <b>Applicant(s)/Patent Under Reexamination</b><br>GOODE ET AL. |
|   | <b>Examiner</b><br>Mehta, Bhisma           | <b>Art Unit</b><br>3767  |

|   |                 |   |                   |   |                     |   |                 |
|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | <b>Rejected</b> | - | <b>Cancelled</b>  | N | <b>Non-Elected</b>  | A | <b>Appeal</b>   |
| = | <b>Allowed</b>  | ÷ | <b>Restricted</b> | I | <b>Interference</b> | O | <b>Objected</b> |

☐ Claims renumbered in the same order as presented by applicant
 ☐ CPA
 ☐ T.D.
 ☐ R.1.47

| CLAIM |          | DATE       |            |  |  |  |  |  |  |
|-------|----------|------------|------------|--|--|--|--|--|--|
| Final | Original | 10/27/2006 | 04/11/2007 |  |  |  |  |  |  |
|       | 1        | ✓          | ✓          |  |  |  |  |  |  |
|       | 2        | ✓          | ✓          |  |  |  |  |  |  |
|       | 3        | ✓          | ✓          |  |  |  |  |  |  |
|       | 4        | ✓          | ✓          |  |  |  |  |  |  |
|       | 5        | ✓          | ✓          |  |  |  |  |  |  |
|       | 6        | ✓          | ✓          |  |  |  |  |  |  |
|       | 7        | ✓          | ✓          |  |  |  |  |  |  |
|       | 8        | ✓          | ✓          |  |  |  |  |  |  |
|       | 9        | ✓          | ✓          |  |  |  |  |  |  |
|       | 10       | ✓          | ✓          |  |  |  |  |  |  |
|       | 11       | ✓          | ✓          |  |  |  |  |  |  |
|       | 12       | ✓          | ✓          |  |  |  |  |  |  |
|       | 13       | ✓          | ✓          |  |  |  |  |  |  |
|       | 14       | ✓          | ✓          |  |  |  |  |  |  |
|       | 15       | ✓          | ✓          |  |  |  |  |  |  |
|       | 16       | ✓          | ✓          |  |  |  |  |  |  |
|       | 17       | ✓          | ✓          |  |  |  |  |  |  |
|       | 18       | ✓          | ✓          |  |  |  |  |  |  |
|       | 19       | ✓          | ✓          |  |  |  |  |  |  |
|       | 20       | ✓          | ✓          |  |  |  |  |  |  |
|       | 21       | ✓          | ✓          |  |  |  |  |  |  |
|       | 22       | ✓          | ✓          |  |  |  |  |  |  |
|       | 23       | ✓          | ✓          |  |  |  |  |  |  |
|       | 24       | ✓          | ✓          |  |  |  |  |  |  |
|       | 25       | ✓          | ✓          |  |  |  |  |  |  |
|       | 26       | ✓          | ✓          |  |  |  |  |  |  |
|       | 27       | ✓          | ✓          |  |  |  |  |  |  |
|       | 28       | ✓          | ✓          |  |  |  |  |  |  |
|       | 29       | ✓          | ✓          |  |  |  |  |  |  |
|       | 30       | ✓          | ✓          |  |  |  |  |  |  |
|       | 31       | ✓          | ✓          |  |  |  |  |  |  |
|       | 32       | ✓          | ✓          |  |  |  |  |  |  |
|       | 33       | ✓          | ✓          |  |  |  |  |  |  |
|       | 34       | ✓          | ✓          |  |  |  |  |  |  |
|       | 35       | ✓          | ✓          |  |  |  |  |  |  |
|       | 36       | ✓          | ✓          |  |  |  |  |  |  |

|  |  |  |
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| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |            |            |  |  |  |  |  |  |  |
|---|----------|------------|------------|--|--|--|--|--|--|--|
| CLAIM   |          | DATE       |            |  |  |  |  |  |  |  |
| Final   | Original | 10/27/2006 | 04/11/2007 |  |  |  |  |  |  |  |
|   | 37       | ✓          | ✓          |  |  |  |  |  |  |  |
|   | 38       | ✓          | ✓          |  |  |  |  |  |  |  |
|   | 39       | ✓          | ✓          |  |  |  |  |  |  |  |
|   | 40       | ✓          | ✓          |  |  |  |  |  |  |  |